| | | • | Attorney's Dock | et No. <u>001580-515</u> | | | | |
|----------|---|---|--|--------------------------|--|--|--|--|
| OIPE 3 | 7.34 1.34 | IN THE UNITED STATES PATENT AND TRADEMARK OFFICE | | | | | | |
| 30. | re F | Patent Application of |) | | | | | |
| TRADEMAS | Arnau | d GOURDOL et al. |) Group Art Unit: 2174 | | | | | |
| | Applic | ation No.: 09/478,006 | Examiner: Thomas J. JOSEPH | | | | | |
| | Filed: | 05 January 2000 GRAPHICAL USER INTERFACE FOR COMPUTERS HAVING VARIABLE | Confirmation No.: 1054 Confirmation No.: 1054 | RECEIVED JUN 1 7 2003 | | | | |
| | | SIZE ICONS | , 1 | Technology Center 2100 | | | | |
| | | REQUEST FOR CONTIN | | - | | | | |
| | Comm P.O. E | STOP RCE dissioner for Patents Sox 1450 adria, VA 22313-1450 | 21839 | | | | | |
| | Sir: | · | | | | | | |
| | Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the [] \$375.00 (2801) [X] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e). | | | | | | | |
| | 1. | Applicant(s) previously submitted the following documents for which continued examination is requested: Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on Consider the arguments in the Appeal Brief or Reply Brief previously filed on Other: Amendment previously filed on 27 May 2003 | | | | | | |
| | 2. | The following documents are enclosed with a [] Amendment/Reply. | this submission: | | | | | |

Affidavit(s)/Declaration(s).

Information Disclosure Statement (IDS).

Small entity status is hereby claimed. No additional claim fee is required.

Other: Petition For One Month Extension of Time

for in this application prior to this submission:

The fee is calculated below on the basis of the highest number of claims already paid

[]

[]

[X]

[]

3.

Request for Continued Examination Transmittal Letter Application No. 09/478,006
Attorney's Docket No. 001580-515

Page 2

| | | CLA | IMS | | <u>_</u> |
|-----------------------|------------------|---|-----------------|--------------------|----------|
| | No. Of CLAIMS | HIGHEST NO. OF CLAIMS THUS PAID FOR | EXTRA CLAIMS | RATE | FEE |
| Basic Fee | | | | \$750.00 (1001) | |
| Total Claims | | MINUS 20 = | | × \$18.00 (1202) = | |
| Independent Claims | | MINUS 3 = | | × \$84.00 (1201) = | |
| If multiple dependent | claims are p | resented, add \$280.0 | 0 (1203) | | |
| Total Fee | | | | | |

| 4. | [] | A check in the amount of \$ is enclosed for the fee due. |
|----|----|---|
| 5. | [] | Charge \$ to Deposit Account No. 02-4800 for the fee due. |
| 6. | [] | Applicant(s) requests suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. |

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: 13 June 2003

TOTAL FEE DUE

If small entity status is claimed, subtract 50% of Total Fee

M. David Ream

Registration No. 35,333

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620